

000FORM PTO-1390 U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE REV. 2/01T		CUSTOMER NO. 22,852 ATTORNEY'S DOCKET NUMBER 02491.0036-00000	
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371		U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 107529268	
INTERNATIONAL APPLICATION NO. PCT/EP2003/009893	INTERNATIONAL FILING DATE September 5, 2003	PRIORITY DATE CLAIMED September 27, 2002	
TITLE OF INVENTION STEEL COMPOSITION AND PARTS FORGED BY A FORGING DIE			
APPLICANT(S) FOR DO/EO/US Johannes ARNDT and Thomas MROS			
<p>Applicant(s) herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:</p> <ul style="list-style-type: none"> 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected by the expiration of 19 months from the priority date (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)). <ul style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed with the United States Receiving Office (RO/US). 6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)). <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154 (d)(4). 7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)). <ul style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)). 9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)). 10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)). <p>Items 11 to 20 below concern document(s) or information included:</p> <ul style="list-style-type: none"> 11. <input type="checkbox"/> Information Disclosure Statement under 37 CFR 1.97 and 1.98 12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. <input type="checkbox"/> A FIRST preliminary amendment. 14. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment. 15. <input type="checkbox"/> A Substitute specification. 16. <input type="checkbox"/> A change of power of attorney and/or address letter. 17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 35 U.S.C. 1.821-1.825. 18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154 (d)(4). 19. <input type="checkbox"/> A second copy of the English language translation of the international application 35 U.S.C. 154 (d)(4). 20. <input type="checkbox"/> Other items or information: <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Copy of cover page of International Publication No. WO 2004/031428 A1 b. <input type="checkbox"/> Copy of Notification of Missing Requirements. c. <input type="checkbox"/> 			

U.S. APPLICATION NO. (If known, see 37CFR 1.5) 10/529268		INTERNATIONAL APPLICATION NO. PCT/EP2003/009893		ATTORNEY'S DOCKET NUMBER 02491.0036-00000																																																																																		
<p>21. <input checked="" type="checkbox"/> The following fees are submitted:</p> <table> <tr> <td colspan="2">BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):</td> <td>\$300.00</td> <td>Applicant Use</td> <td>Office Use Only</td> </tr> <tr> <td colspan="2">National Stage Search Fee.....</td> <td>\$500.00</td> <td>\$</td> <td>\$</td> </tr> <tr> <td colspan="2">National Stage Examination Fee.....</td> <td>\$200.00</td> <td>\$</td> <td>\$</td> </tr> <tr> <td colspan="4" style="text-align: right;">ENTER APPROPRIATE BASIC FEE AMOUNT =</td> <td colspan="2">\$1000.00</td> </tr> </table> <p><input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.</p> <table> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of additional 50 or fraction thereof (rounded up to a whole number)</th> <th>Rate</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td>/50 =</td> <td></td> <td>x 250.00</td> </tr> </tbody> </table> <p>Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).</p> <table> <thead> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>9</td> <td>- 20 =</td> <td>x \$50.00</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>-3 =</td> <td>x \$200.00</td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+\$360.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL OF THE ABOVE CALCULATIONS =</td> <td colspan="2">\$1360.00</td> </tr> </tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.</p> <table> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL =</td> <td colspan="2">\$1360.00</td> </tr> </table> <p>Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest priority date (37 CFR 1.492(f)).</p> <table> <tr> <td colspan="4" style="text-align: right;">TOTAL NATIONAL FEE =</td> <td colspan="2">\$1360.00</td> </tr> </table> <p>Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property.</p> <table> <tr> <td colspan="4" style="text-align: right;">TOTAL FEES ENCLOSED =</td> <td colspan="2">\$1360.00</td> </tr> </table> <table> <tr> <td colspan="4"></td> <td>Amount to be refunded:</td> <td>\$</td> </tr> <tr> <td colspan="4"></td> <td>charged:</td> <td>\$</td> </tr> </table> <p>a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>1360.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>06-0916</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.</p> <p>SEND ALL CORRESPONDENCE TO:</p> <p>Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P. 901 New York Avenue, N.W. Washington, D.C. 20001-4413</p> <p> SIGNATURE Ernest F. Chapman/Reg. No. 25,961</p> <p>DATED: March 25, 2005 NAME/REGISTRATION NO.</p>						BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):		\$300.00	Applicant Use	Office Use Only	National Stage Search Fee.....		\$500.00	\$	\$	National Stage Examination Fee.....		\$200.00	\$	\$	ENTER APPROPRIATE BASIC FEE AMOUNT =				\$1000.00		Total Sheets	Extra Sheets	Number of additional 50 or fraction thereof (rounded up to a whole number)	Rate	- 100 =	/50 =		x 250.00	CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total Claims	9	- 20 =	x \$50.00	Independent Claims	1	-3 =	x \$200.00	MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+\$360.00	TOTAL OF THE ABOVE CALCULATIONS =				\$1360.00		SUBTOTAL =				\$1360.00		TOTAL NATIONAL FEE =				\$1360.00		TOTAL FEES ENCLOSED =				\$1360.00						Amount to be refunded:	\$					charged:	\$
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):		\$300.00	Applicant Use	Office Use Only																																																																																		
National Stage Search Fee.....		\$500.00	\$	\$																																																																																		
National Stage Examination Fee.....		\$200.00	\$	\$																																																																																		
ENTER APPROPRIATE BASIC FEE AMOUNT =				\$1000.00																																																																																		
Total Sheets	Extra Sheets	Number of additional 50 or fraction thereof (rounded up to a whole number)	Rate																																																																																			
- 100 =	/50 =		x 250.00																																																																																			
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE																																																																																			
Total Claims	9	- 20 =	x \$50.00																																																																																			
Independent Claims	1	-3 =	x \$200.00																																																																																			
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+\$360.00																																																																																			
TOTAL OF THE ABOVE CALCULATIONS =				\$1360.00																																																																																		
SUBTOTAL =				\$1360.00																																																																																		
TOTAL NATIONAL FEE =				\$1360.00																																																																																		
TOTAL FEES ENCLOSED =				\$1360.00																																																																																		
				Amount to be refunded:	\$																																																																																	
				charged:	\$																																																																																	